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## APPLICANTS

Kurt Sigerud, Goodridge, MN;

Mike Tursky, Fond Du Lac, WI;  
Ted Bettin, Thief River Falls, MN;\*\* CONTINUING DATA \*\*\*\*\* *none TMS*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *none TMS*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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|   |                           |                        |                       |                            |
|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged <i>TMS</i><br>Examiner's Signature _____ Initials _____ | STATE OR<br>COUNTRY<br>MN | SHEETS<br>DRAWING<br>6 | TOTAL<br>CLAIMS<br>19 | INDEPENDENT<br>CLAIMS<br>2 |
|---|---------------------------|------------------------|-----------------------|----------------------------|

## ADDRESS

23552  
MERCHANT & GOULD PC  
P.O. BOX 2903  
MINNEAPOLIS , MN  
55402-0903

## TITLE

Auto enrichener

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